FORM . FOR INSTRUCTIONS. SEE BACK OF FORM **DISCLOSURE SUMMARY PAGE** DR-2 DISCLOSURE REPORT (Rev. 07/2004) COMMITTEE NAME (Must be same as on Statement of Organization) Committee Vancy Boettger for State Senate For Office Use Only Comm. # Logged In S IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party Scanned (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Computer Audited Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Late reports are subject to Candidate Name possible civil and crimina penalties. District (if Senate or House) Office Sought Senate SIGNATURE OF DERSON FILING REPOR REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR. Indicate by # Local Committees, enter Date of Election □CHECK IF AMENDMENT TO REPORT DATED _ County & Local Committees, enter County in Check If this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND 1 CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 690.86 of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD 3377, 90 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL\$ 15915.12 846,36 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... Schedule F: Loan Repayments total (Attach Schedule F)..... 15068,76 CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ *OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ JYES NO CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	A (Rev. 07/03)	MONETARY RECEIPTS	
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COMMITTEE NAME (Must be same as on Statement of Organization)

Nana Boetler for State Senate Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
6/3/10	ID# CK# 5929	georgield pti. 50449		\$ 100.00	
6/3/10	ID# CK# 1049	Mg. Venteicher 6323 Panarama Dr. Panora Na. 50216		100.00	
6/3/10	ID# CK# 1768	Maradith Janssen 17241 Cardinal Dr. Earlham Ja. 50072		50.00	
6/3/10	CK# 1729	Kristen Canham 3462 Scenie Viota Dr West Des Mocies da. 50265		50.00	
6/3/10	ID# CK# 29 73	Mary grand 1918 Oak Rd. Defrance etc. 51527		50.00	
6/3/10	ID# CK# 4587	5thven ackerson 1634 nw 1315t 5t. Clive, la. 50325		100.00	
6/3/10	ID# 6067 CK# 5013	Jowa Health PAC 1775 904 \$. West Des Moine, la 50266		50.00	
7/6/10	iD# ск# 5799	Union factic Corp. trund for Effection 600 Bt St N.W. Suite 1340 good Washington, DC. 2000 5	e .	250.00	
7/14/10	ID# 6058 CK# 4717	la Chropiatic Sout PAC 100 E. Gland our Ste 240 Des Moines, cla. 50309		100.00	
7/14/10	ID# CK# 2064	stephen Roberts 215 10 th st. 502 1300 Des Moines, bla. 50309-3616		<i>5</i> 0.00	
			SUB-TOTAL	01350 as	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surmarne of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of Z (for Schedule A)

TOTAL (If last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Nancy Boether for State Senate Committee

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS						
CHECK THIS BOX IF AMENDING FORM							

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/14/10	ID# CK# 1790 ID# 60 2/ CK# 00 2546 ID# CK# 2333 ID# CK#	Thomas Cope 8532 newhory of. Johnston, la 50/31-8762		\$ 25.00	
7/14/10	CK# 00 2546	Des Moines, la. 5030 6		1500.00	
7/14/10	CK# 2 33 3	PRINTAL alo Verty Tobin 20 High St Das Moinearla 50392		500.00	
614/10 72/10	ID# CK#	Interest on checking Shally County Baloes and Harlan Ja 5,537		2.90	
	ID# CK#				
			SUB-TOTAL	49-22-9	

TOTAL (If last page of this schedule)

\$ 3377.90

Page 2 of 2 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organ lancy CANDIDATE NAME AND ADDRESS TO WHOM DATE PURPOSE **ID NUMBER** AMOUNT **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED** (if applicable) EXPENDED (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# 2 flags for parades 5/28/10 * Chafburn CK# 1026 s 33,36 Harlas la 51537 Largena Palygiel CK# 1027 18.00 Elk Horn da 5153/ 28152 Stump Hollow RP 120.00 CK# 1028 adel da 50003 David Boetfeer 1350 miles @ .50/mi. 926 Ironwood RA 675.00 CK# 1029 Harlan, Ia. 51537 CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL TOTAL (if last page of this schedule)

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, poiling, menaging, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lowe Code 68A.402(3)(i).)

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Page	 of	